

EX: #69

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
INMATE'S REQUEST TO STAFF MEMBER		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
PSYCH DEPARTMENT			
1. To: (Name and Title of Officer) SALVEDRA, DUNCAN, SCHAPP, BRIGHT		2. Date: 9/29/22 CPM	
3. By: (Print Inmate Name and Number) T. MONTANA BELL #LD 5447		4. Counselor's Name: ?	
Inmate Signature		5. Unit Manager's Name: ?	
6. Work Assignment		7. Housing Assignment: ID-7	
8. Subject: State your request completely but briefly. Give details.			
<p>I NEED SOME HALDOL<sup>2 MG</sup> MEDICATION &amp; I NEED IT NOW. TELL TINA WALKER TO STOP GIVING ME CELLYS TOO. SHE KEEP TRYING TO BRIBE ME &amp; I'M NOT FOR SALE. MAKE HER STOP OR MY LAWYERS WILL. &amp; GET ME A COMPOSITION BOOK W/A 100 SHEETS &amp; MY A/C PHONE, VISIT &amp; COMMISSARY PRIVILEGES.</p> <p>M. Bell,</p> <p>Please work with Mrs. Schapp. She work Competent Prisoner &amp; Mental Health Services.</p>			
To DC-14 CAR only <input type="checkbox"/>		To DC-14 CAR and DC-15 IRS <input type="checkbox"/>	

STAFF MEMBER NAME Lisa Duncan Schapp, LPM DATE 9/30/22  
 CC: DAVID W. CORNISH, ESQ. Print  
 JOE HAUSCHOLDT, ESQ.  
 MICHAEL VAN DER VEEN, ESQ.  
 BRETT GROTE, ESQ.

Cc: File

Attachment 3-A